

# *Volunteer Handbook*



**Department of Veteran Affairs  
VA Boston Healthcare System**

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## VA BOSTON HEALTHCARE SYSTEM

### *"Putting Veterans First"*

VA Boston Healthcare System, the largest consolidated facility in VISN 1, encompasses 3 main campuses and 5 outpatient clinics within a 40-mile radius of the greater Boston area. The consolidated facility consists of the Jamaica Plain Campus, located in the heart of Boston's Longwood Medical Community; the West Roxbury Campus, located on the West Roxbury/Dedham line; and the Brockton Campus, located 20 miles south of Boston in the City of Brockton. In addition to the 3 main medical centers, the Community Based Outpatient Clinics (CBOCs) that make up the VA Boston Healthcare System (VA BHS) are located in Framingham, Lowell, Quincy, Plymouth and Causeway Street (Boston).

The VA Boston Healthcare System is dedicated to serving the needs of America's veterans. It is committed to providing the highest quality health care, to expanding the boundaries of medicine through research, and to training the next generation of health care professionals.

### **Vision**

Our vision is that the VA Boston Healthcare System will be known for the outstanding services we provide, our compassion for our veterans, our collaborations with the communities that we serve, and our education and research initiatives.

### **Values**

All of the efforts within the VA Boston Healthcare System will be based on the core values of:

**Trust**  
**Continuous Improvement**  
**Mutual Respect**  
**Diversity**

**Teamwork**  
**Integrity**  
**Innovation**  
**Customer Service**

## ***INTRODUCTION***

VA Volunteers bring to patients a part of the outside world and a feeling of belonging - of not being isolated because of hospitalization. This friendly interest and personal contact are very important for the patients' wellbeing. Your presence and your service are key factors in maintaining a positive atmosphere of hope and cheer.

The patients and staff of VA Boston Healthcare System thank you for your friendly interest and your faithful service.

RALPH MARCHE  
Chief, Voluntary Service  
Dated: 1994  
Revised: 6/09/2014



## **What is VAVS?**

"VAVS" stands for the US Department of Veterans Affairs Voluntary Service, or VA Voluntary Service. VAVS is a plan for community participation in the VA's program for providing health care and treatment to our nation's veterans. Through this plan, community volunteer efforts are brought together and made a meaningful part of the program for patients in VA health care facilities. The Chief of Voluntary Service plans with management and staff for the appropriate placement of individuals, groups, gifts, and resources so as to meet hospital-wide patient needs.

Five basic aspects of VA Voluntary Service need to be clearly understood if volunteer participation is to be successful:

### **VAVS is VA Directed**

The VA coordinates and integrates community volunteer participation in its medical care programs. VA Voluntary Service is an official, authorized part of the medical center program; it is responsible for the volunteer participation of individuals from the community in any and all aspects of the program.

### **VAVS is Jointly Planned**

The VAVS plan has been developed in collaboration with the VA Voluntary Service National Advisory Committee. Representatives of our county's outstanding voluntary groups continually advise and counsel with the VA so as to plan and develop our program of community volunteer assistance.

### **VAVS Provides Supplemental Assistance**

Volunteer workers supplement and extend the service of paid staff; VA volunteers do not replace paid staff. Emphasis in VAVS is on service; gifts and donations, while important, are incidental to service.

### **VAVS Allows Volunteers to Serve in Many Areas**

Volunteers play vital roles in most services within the Medical Center such as Medical Administration, Rehabilitative Medicine, Recreation, Nursing, Pharmacy, Chaplain and other services. Again, assignments range from direct patient care to a variety of clerical support functions.

### **VAVS Provides a Two-Fold Service**

Volunteers provide a direct service to this Medical Center by participating in programs designed for patient welfare under VA supervision. They provide an equally important indirect service to the Medical Center by acting as public relations ambassadors to our community. They inform their friends and neighbors about the Medical Center's medical care and treatment programs and the role of the community in assisting these programs.



## **VA Management Team for Voluntary Service**

Director HHealthCare System

Associate Director HealthCare System

Chief of Staff

Chief, Voluntary Service

The management team has the responsibility for developing and maintaining the proper climate for a volunteer program wwithin the Medical Center that is purposeful and worthwhile for patients, staff, volunteer organizations and volunteers.

## **VAVS Staff Advisory Committee**

This committee will advise and actively assist the Chief, Voluntary Service, in the planning and operation of the station's VAVS program.

## **VAVS Advisory Committee**

A VA Voluntary Service Advisory Committee has been established with the following membership:

1. Associate Director Healthcare System, Chairman
2. Chief, Voluntary Service, Deputy Chairman
3. Officially certified representatives of national organizations which are identified with the VAVS program on the national and Medical Center level.
4. Appointed representatives of other organizations as deemed advisable by the chairman of the local committee.

The VAVS Advisory Committee will assist the Chairman and the Deputy Chairman in an advisory capacity in the planning and execution of a variety of Voluntary Service activities.

## **Qualifications of a Volunteer**

### **Qualifications**

1. Sincere interest in rendering service.
2. Businesslike approach to work.
3. Willingness to accept hospital standards.
4. Sense of humor.
5. Sense of responsibility and dependability in accomplishment of purpose.
6. Ability to work with groups, as well as with individuals.
7. Tact, congeniality, patience, warmth, and kindness.
8. Physical ability to perform hospital work.
9. Sense of pride in the work.

### **Special Qualifications**

Include the necessary tact, talent, previous experience, training, interests and hobbies adequate to meet the needs of a specific assignment.

### **Age Requirements**

The minimum age for volunteers is 14.

### **Volunteer Classifications**

Regularly Scheduled (RS) volunteers participate in established, scheduled assignments with suppression. Occasional volunteers come in for special events. They also help with regularly sponsored programs of VAVS organizations on an occasional basis. All volunteers, both RS and Occasional, must complete a volunteer registration with the Voluntary Service Office.

### ***You and the Medical Center Staff***

This relationship will be based on mutual respect for the job each is trying to accomplish. You will find that the Medical Center staff will:

1. Give you the respect due a fellow member and worker on the Medical Center team.
2. Assign you to a needed task.
3. Give you helpful on-the-job instruction,
4. Discuss with you any matters concerning your volunteer assignment.

### **YOU AS A MEMBER OF THE MEDICAL CENTER TEAM**

You will gain the respect of your fellow team members by:

1. Knowing and observing the hospital rules and regulations.
2. Being dependable and faithful in your assignments.
3. Reporting on time and staying until assignment is completed.
4. Following the instructions of the staff member to whom you are assigned.
5. Being kind and friendly to all patients.
6. Avoiding involvement, emotionally or personally, in patient's problems.
7. Remembering that all personal information, which you learn from or about a patient, is confidential.
8. Conducting yourself with the dignity and assurance of a qualified member of the team performing a needed service in a pleasant and efficient manner.

# HIPAA / Privacy

In 1996, Congress passed the Health Insurance Portability and Accountability Act (HIPAA). On December 28, 2000, the Department of Health and Human Services published the final rule for Standards for the Privacy of Individually Identifiable Health Information-known as the HIPAA Privacy Rule. This new ruling required that every member of the Veterans Health Administration workforce receive training on the new VHA privacy policies by the implementation date of April 13, 2003. This includes volunteers, students, medical residents, contractors and all other employees whether or not that staff member has direct patient contact. The Privacy Policies include information on patients and employees.

VA Boston Healthcare System has outstanding professional and caring staff. Our staff works hard to always treat our patients with respect.

VHA Employees must use or access information only as legally permissible under applicable confidentiality and privacy laws, regulations and policies.

All VHA employees can use information contained in VHA records in the official performance of their duties for treatment, payment and healthcare operational purposes.

Common violations of HIPAA are:

- Staff discussing patients in elevators and hallways, whether or not names are used
- Patients being discussed during rounds where other patients or visitors may hear.
- Staff discussing the patients status with the patient and family in hallways or waiting rooms
- Medical record left unattended in hallways, on counter tops or in unlocked rooms
- Computer screens with patient information visible to patients or visitors or left unattended
- Privacy curtains or doors not fully closed in exam rooms or on a ward
- Patient information on “status boards” which is visible to other patients or visitors
- Office doors open during the discussion with or about patients

**Remember: Respecting and providing for patients privacy is EVERYONES responsibility.**

For more information on the Health Insurance Portability and Privacy Act as related to the Veterans Health Administration please visit <http://vaww.va.gov/hipaa>



# General Information

## **Supervision**

All volunteers work under the supervision of a staff member. You will be introduced to your supervisor when you begin your assignment. If you have any questions concerning the performance of your assignment, discuss them with your supervisor.

## **Assignment Guide**

There is a printed guide for every volunteer assignment. Know your permitted duties and adhere to them.

## **Change of Assignment**

Assignments are based on the volunteer's interests and the Medical Center's needs. If you are not satisfied with your assignment or would like an additional assignment you may discuss it with the Chief of Voluntary Service.

## **Attendance/Vacation/Termination**

Dependability is important for all volunteers. However, if you cannot report for your assignment, please call your supervisor directly. YOUR ASSIGNED SUPERVISOR will then be aware of your situation and reschedule your volunteer hours as needed. The Voluntary Service office at each campus can be contacted if we can be of assistance. We would like to know in advance if you plan to be away or on vacation. At the termination of your volunteer assignment please clear through the Voluntary Service office to ensure continuity of service to our veterans.

## **Recording of Time**

Volunteers are required to record the hours they are working each day on the volunteer computer in the medical center and outpatient clinic. PLEASE SIGN IN EVERY DAY YOU ARE WORKING!

If you are unable to log in your hours, please contact the volunteer service office immediately. Some sites may require calling in or e-mailing hours to the voluntary service office.

## **Meals**

Lunches are furnished without charge to regularly scheduled volunteers through the VCS Cafeteria provided that the scheduled assignment extends over a meal period and is at least four hours in length. Meal tickets must be obtained through the volunteer computerized time keeping system. Volunteer ID BADGES ARE REQUIRED TO USE MEAL TICKETS. In Brockton meals are provided through the Canteen and Nutrition and Food Service kitchen, this is also true in the case of off hours meals at West Roxbury. A sign in sheet is provided in the kitchen for you to sign for your meal. Again, your volunteer assignment must extend through a meal period and be a minimum of four hours in order to qualify for it.

## **Parking**

Daytime parking at the medical centers and the outpatient clinic in Boston is limited. Volunteers are encouraged to use public transportation. Volunteers may use the lots in West Roxbury and Brockton but must obey local postings for lot regulations. Volunteers who must drive need to register their vehicle with the VA Police Service. Volunteers will be issued a parking decal and can park in the patient or employee parking areas.

## **Library**

Regularly scheduled volunteers have the same privileges as employees in using the services of the Reading Room. The Reading Room is located on the third floor and has a wide selection of popular fiction, non-fiction and periodicals in JP and the AG dayroom building 2 in WR.

## **Identification and Uniform**

Uniforms are not required; however, all volunteers in accordance with hospital policy must wear an ID badge which will be provided by the VA. Affiliated volunteers are governed by the uniform of their organization. It is recommended that volunteers, especially those having patient contact, wear some type of attire with pockets to carry money and personal items. Good grooming, conservative dress and comfortable walking shoes are essential for duty in a hospital.

## **Confidential Information**

As a member of the Medical Center team, you may learn confidential information. The patients may confide in you, their families may share information and you may overhear staff conversations. Remember that this is not to be repeated to unauthorized individuals. If you believe the information will help the patient in his/her treatment, discuss the matter with your supervisor.

## **Medical Treatment**

Volunteers must report all accidents, injuries or incidents to their work supervisor. If you incur an injury while on duty, report it to your immediate supervisor at once. Employee Health Services will provide emergency medical treatment to the volunteer. Volunteers are treated as employees for purposes of accidents and injury occurring during official, regularly scheduled volunteer duties. After you receive first aid, your immediate supervisor is responsible for completing the proper accident and/or injury reports with you.

## **Visiting**

If you wish to visit a friend who is a patient, do so after you have completed your assignment. Visiting hours are from 1:00 PM to 8:00 PM daily.

## **Proper Conduct**

The Department of Veterans Affairs is committed to providing a proper work environment for its patients, employees and volunteers. Sexual harassment, patient abuse (verbal and physical) and discriminatory remarks and actions will not be tolerated. If as a volunteer, you feel you have been the object of such behavior or have witnessed such events contact the Chief of Voluntary Service immediately.

## **Donations**

We welcome donations for the comfort and well being of patients and the Chief of Voluntary Service is the point of contact for all such donations. We encourage all potential donors to contact our Voluntary Service office prior to making any donation.



### **What is “Risk”?**

Risk is anything that creates a hazard to yourself or others.

### **What are some common risks found in a hospital setting?**

#### **Risk of Infection:**

Poor hand hygiene (not cleaning your hands properly with either soap and water or an alcohol based hand rub) can spread germs.

Poor Respiratory Etiquette (not covering your mouth and nose when coughing or sneezing, not disposing of used tissues properly) can lead to the spread of respiratory infections.

#### **Risk of Injury to self and others:**

Not disposing of trash/sharps in the appropriate containers can contribute to injuries.

Not keeping your work area clean and free of leftover food and dirty eating utensils can invite insects and rodents.

Not cleaning up spills can lead to falls.

Not reporting a potential hazard can lead to injuries.

### **How can we prevent Risks?**

Be aware of safety goals and infection control policies that pertain to you as a student, volunteer, contract, WOC, temporary or permanent employee:

- Improve the accuracy of patient identification
- Improve the effectiveness of communication with veterans, families, co-workers and others
- Reduce the risk of healthcare acquired infections by using good hand hygiene, good respiratory etiquette, proper trash disposal, and keeping your work area clean
- Reduce the risk of influenza and pneumococcal disease in older adults by staying home if you are running a fever or have uncontrolled coughing, by using tissues to cover your mouth and nose if you are coughing or sneezing and then disposing of the tissues properly and by frequent hand washing.
- Reduce the risk of injury by using Personal Protective Equipment appropriately
- Reduce the risk of theft by securing personal belongings at all times
- Reduce the risk of patient harm from falls by keeping corridors and walkways clear
- Learn to recognize warning signs of violent behavior to prevent risk to yourself and others
- Know the location of all fire equipment and how to use it
- Utilize verification process to prevent wrong site surgery/invasive procedures
- Prevent errors from medications that look alike/sound alike
- Insure use of free-flow protection on IV infusion pumps
- Use only approved abbreviations in the medical record

## Life Safety – Fire Safety

<b>Fire Code – “Code Red” Emergency number:</b>	<b>Boston/West Roxbury/Brockton</b>	<b>dial “33333”</b>
	<b>Boston OPC (Causeway)</b>	<b>dial “1333”</b>
	<b>Lowell OPC</b>	<b>dial “51”</b>
	<b>Worcester OPC</b>	<b>dial “22 # 7”</b>

*Wait for chimes to end and then dial 00*

## POLICE EMERGENCY NUMBER – “55911”

**Fire Alarm Boxes-** located at Stairwells, Exits and Nurses’ stations

**To activate a fire alarm –** pull down and release the lever at firebox.

**Fire pull station alerts** entire complex and local fire department.

**Some pull stations are activated** with a standard key – have this on your person (if applicable)

**Fire Alarm: Bells, Horns, Chimes –**announce a fire code

**Fire Strobe Lights -** visually indicate a fire code

**Overhead Page –**announces fire location

**R.A.C.E.** stands for **Rescue – Alarm – Confine –Extinguish** (If small and manageable)

**(Evacuate upon order of Fire Department)**

**Defend in Place -** Close all doors, clear corridors, evacuate area, await Fire Department.

**P.A.S.S.** stands for **Pull – Aim – Squeeze - Sweep**

**Smoke barrier doors –** close to contain smoke in one area – do not breach.

**Location of fire extinguishers:** Wall closets with doors marked fire equipment.

**Fully sprinklered buildings in patient care areas –** smoke damage will be most likely to occur and cause need for evacuation of immediate area.

**Same building, non-fire area –** closes all doors, clear corridors, await instructions.

**Fire Alarm, False Alarm, Fire Drill —** treated as a real “Fire Scenario”

**Keep all patients behind closed doors.**

**Keep all individuals/visitors from entering alarmed area until “ALL CLEAR” is announced.** This applies to the entire building.

**Elements of a Fire: Fuel – Oxygen – Heat,** take away any element and you disrupt the chain reaction.

**Evacuation:** Horizontally and vertically – per instructions of Fire Department

**Elevators shall not be used**

**Medical Gas shut offs –** within 25 feet of nurses’ station

**Fire Drills –** Quarterly - each shift in a patient care area

Annually - in non- patient care buildings

**Fire Safety Plans -** located in the Environment of Care Manual

### **Safety is everyone’s business – practice it daily**

**OSHA created in 1970** to protect individuals in the workplace.

**Common prohibited items –** toaster ovens, extension cords, door stops/wedges.

**Doors with closures are installed** to keep door closed at all times.

**Common problematic practices:**

- |                                 |                            |                                       |
|---------------------------------|----------------------------|---------------------------------------|
| - Obstructed fire extinguishers | - Obstructed pull stations | - Toasters-microwaves left unattended |
| - Obstructed smoke doors        | - Obstructed exits         |                                       |

## *VA Boston Emergency Management Program*

**Emergency Management** is defined as the science of managing complex systems and multidisciplinary personnel to address emergencies and disasters, across all hazards, and through the phases of mitigation, preparedness, response, and recovery. This involves organized analysis, planning, decision making, and assignment of available resources to mitigate (lessen the effect of or prevent) prepare for, respond to, and recover from the effects of all hazards.

**An Emergency Management Program** implements the organization's mission, vision, management framework and strategic goals and objectives related to emergencies and disasters. The "program" applies to all departments and organizational units within the organization that have roles in responding to an emergency.

**The goal of emergency management is to save lives, prevent injuries, and protect property and the environment if an emergency occurs. The goals of the VA Boston Emergency Management Program are to:**

- Take care of people (patients & staff)
- Take care of operations (sustain functions and resources)
- Take care of the community (provide regional assistance to the public)
- For more information on VA Boston Emergency Management please contact:  
Christopher Roberts, VABHS Emergency Manager at 774-826-1150 Cell Phone #- 617-799-3317 or E-Mail at: [Christopher.roberts3@va.gov](mailto:Christopher.roberts3@va.gov)
- For information from the Emergency Operations Plan (EOP) see your supervisor or use the link below: <http://VA Boston HCS - EOP>
- Additional information may be found at the following websites: ● Federal Emergency Management Agency @ [www.fema.gov](http://www.fema.gov)
- Are You Ready? Free course from FEMA IS-22 Are You Ready? An In-depth Guide to Citizen Preparedness
- U.S Department of Homeland Security @ [www.ready.gov](http://www.ready.gov)

### Responsibilities:

The following persons have specific responsibilities, which are defined in the plan.

- . Director, Boston Healthcare System
- . Chief of Staff
- . Safety Officer
- . Emergency Management Committee
- . All Service Chiefs
- . All Employees

## **\*\*\*Emergency Codes\*\*\***

### AT ALL DIVISIONS/CAMPUSES AND OUTPATIENT CLINICS:

Code **Gray**----- Disaster

Code **Blue**----- Medical

Code **Red**----- Fire

Code **Green** ----- Psychiatric

Code **Yellow**----- Missing Person

#### • Emergency Management Resources Staff

Safety Officer	Stacey O'Rourke	61161	Cell Phone: 617-272-6229
Safety Manager	Terry Elliot	61177	
Industrial Hygienist	Mary Biagiotti	45718	Cell Phone: 617-686-8274
• <u>Safety Specialists</u>			
Brockton	Kim Peyton	61517	Cell Phone: 617-990-7612
Jamaica Plain	Franz Israel	45851	Cell Phone: 617-594-4311
West Roxbury	Huong Nguyen	36690	Cell Phone: 617-921-3790

# HAZARDOUS MATERIALS FACT SHEET

## **WORK SAFE – KNOW THE CHEMICAL HAZARDS**

- Know and understand the chemical hazards in your work area
- Read the hazard warnings on container's label
- Refer to the Material Safety Data Sheet (MSDS) for additional information
- Utilize the Chemical Inventories of your service to know what chemicals are being used
- Properly store your chemicals (by chemical compatibility and in a manner to avoid spillage)
- **DO NOT** dispose of chemicals in sink drains or in trash barrels
- Contact the Safety Office for chemical disposal (**extension 61158**)
- Recognize and report any unsafe conditions or malfunctioning equipment to your supervisor

## **EMERGENCY TELEPHONE NUMBERS AND RESOURCES:**

**FOR CHEMICAL SPILLS AND/OR LEAKS:  
DIAL EXTENTION 33333**

### **PROVIDE THE FOLLOWING INFORMATION:**

- IDENTIFY THE LOCATION
- DESCRIBE THE TYPE OF INCIDENT

### **RESOURCE PERSON:**

**Mary Biagiotti**  
**Industrial Hygienist/Chemical Hygiene Officer**  
**Direct Tel. #: 857-364-5718**  
**Emergency: Cell #: 617-686-8274**

## OCCUPATIONAL HEALTH SERVICES

### FACT SHEET

**Occupational Injury:** Employees who become injured while performing their assigned duties are covered under the Federal Employees Compensation Act. Employees sustaining work related injuries are to report to the Occupational Health Clinic as soon as possible.

**Occupational Illness:** Defined as the acquisition of a disease through exposure in the work environment.

**Duty Status Determinations:** Employees on restricted duty or who have been unable to report to duty due to a non-occupational injury or serious illness of greater than 3 days duration will report to Occupational Health with appropriate medical documentation before resuming regular duties.

**Non-Occupational Injury:** Employees who sustain non-work related injuries are not authorized to receive care through Occupational Health. Employees should seek care from their primary care provider or local emergency department as appropriate.

**Non-Occupational Illness:** Employees who have an illness of three days or less and wish to remain at work may be evaluated by Occupational Health. Employees who have been ill for more than three days will not be evaluated for their illness in Occupational Health. They should contact their primary care provider for evaluation and treatment.

**Work Safety:** A supervisor may escort an employee to Occupational Health for evaluation if the supervisor feels the employee is under the influence of alcohol or drugs or is otherwise physically or mentally impaired.

**Fitness for Duty Evaluations:** Fitness for Duty Evaluations are specific medical evaluations authorized by OPM regulations. The purpose of the evaluation is to determine if an employee is physically or mentally capable of performing the essential functions of their job. These evaluations must be requested by the Service Care Line Chief through the Chief of Human Resource Management.

**Immunization and Well Visits:** Visits for blood pressure check, record reviews, health form completion, etc, must be previously scheduled and will be screened to determine appropriateness.

## CONTACT INFORMATION

Robert Sprague  
Director, C&P and Occupational Health Services  
857-364-5003

Nancy Gendreau, N.P.  
Brockton  
774-826-2305 (62305)  
(45353)

Sandra Bock, PA-C, M.Ed.  
West Roxbury  
857-203-6127 (36127)

Laura Connolly  
Jamaica Plain  
857-364-5353



## Top 10 Things You Can Do To Avoid the Risks of Compromising Information Security

*No matter what job you do to serve veterans, the security of their information depends on you. These days, the ability to get the job done depends upon our computers and the networks that connect them. Without them and the data they manage for us, we're simply out of business. Staying in business is the hard-edged practical side of security. There's another, more human side. If you think about it, our veterans did their part to preserve our right to privacy. It's only right that we do our part to preserve theirs.*

### **HERE'S WHAT YOU CAN DO:**

#### **1. Log-Off the computer when you walk away from it.**

Avoid the risk of another individual using your password. You should log off the computer when you are finished. If you don't, it is the same as sharing your password. .

#### **2. Know your Information Security Officer (ISO).**

**Eileen Robillard (ISO) Jamaica Plain Campus    Ph: 857 364 5639    BB: 617 719 3009**

**Joseph Davis (ISO) West Roxbury Campus    Ph: 857 203 6225    BB: 857 383 9568**

#### **3. Be careful with the information you use to do your job.**

As a VA Boston Healthcare System employee, you are responsible for the security of the information and computers you work with. For example, you must make sure that your actions don't make information available to people who are not entitled to have it or read it, including information on a computer screen and paper copies you print. Be careful talking about patients and other sensitive matters in public places. These responsibilities do not end when you leave.

#### **4. Be sure all software is "legal" and approved for your system.**

Don't risk infecting the VA computer system; if in doubt contact your ISO.

#### **5. Talk to your ISO to determine what must be done to secure the information you send through electronic mail.**

Make sure that the information you send in e-mail is sent securely. Without considering the risks involved, we sometimes e-mail medical records, financial data, or other sensitive information that needs protection.

#### **6. Understand that you are responsible for your work when using VA computers and information.**

Remember that in a computerized workplace, what you do may have an effect across the VA Boston Healthcare System, VISN 1, or even across the entire VA.

#### **7. Don't open e-mail messages or their attachments that came from people you don't know.**

Be careful with e-mail messages from people you don't know, especially if they're not work-related. These sometimes contain computer viruses and worms, and opening them can cause the virus to spread in the VA and slow down our work. Don't forward



chain letters. They take time away from our jobs and clog our network. Also, be careful when responding to messages; you may be responding to more people than you think. These unintended messages bog down our computers.

### **8. Choose a good password.**

A good password is hard to guess. That means it does not contain a word that others know is important to you, like your spouse's name. That means it contains at least eight characters. That means it contains upper case letters, lower case letters, numbers, and "special characters", like #, &, and %. (Note: you only need three of those four types of characters).

### **9. Change your password when you think it has been compromised.**

Minimize the risk that somebody might guess your password. Some computers will tell you when your password was last used. Be suspicious! If the last sign-on was not really yours, inform your ISO and change your password. It means somebody is doing something on the computer and making you responsible!

### **10. Don't share your password.**

Quite simply, if you share your password you become responsible for other's actions! Think of the mischief someone can do with veterans' information, your e-mail, or with your leave requests. Keeping your password in a public place is just like sharing it. If you must write it down, keep it in a safe place.

### **You and Your password**

Your passwords are very important security controls. This information tells you why and helps you to manage your password. It's all part of keeping our veterans' information secure and our computers safe. It's also about protecting your personal reputation.

### **Why are passwords important?**

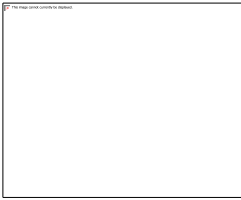
Passwords identify you to a computer system. They inform the computer that you are trusted to work with VA information. They specify the information you should see. Different jobs have different access requirements. Your password ensures that you don't see what you don't need. That way, you are protected from accusations of privacy violations or entering inaccurate data. Your password ensures that you and only you are accountable for your work. When used properly, your password ensures you cannot be blamed for the actions of others on the computer.

### **What if I have questions about my password?**

Assignment of passwords is often the responsibility of computer system managers. However, your ISO is responsible for managing your facility information security program and can advise you about secure password selection and use.

***This information has given you some things you should do...and not do...to help maintain the security of the VA Boston Healthcare System information and computers. Your ISO is there to answer your questions and help you do your part.***

**REMEMBER: YOU ARE THE MOST IMPORTANT PART OF INFORMATION SECURITY AT THE VA BOSTON HEALTHCARE SYSTEM**



# VA Boston Healthcare System Infection Prevention

Each year approximately 1.7 million Americans get an infection due to being in the hospital. Hospital associated infections result in ~ 99,000 deaths/year. Many, if not most of these infections are preventable. The VA Boston Healthcare System is committed to reducing the number of health-care associated infections and has a team of healthcare professionals working with staff on ways we can prevent these infections and “break the chain of infection”.



*Targeting Zero* is the philosophy that every healthcare institution should be working toward a goal of zero healthcare-associated infections (HAIs).

## Contact Information

Name	Title	Extension
Cindy Tibert, RN	Infection Prevention Manager	<b>36618</b>
Rosemary Morse	Program Support Assistant	<b>36940</b>
Dr. Judith Strymish	Hospital Epidemiologist	<b>36881</b>

### Infection Preventionists:

Alice Skolnik, RN	Bobbie Welch, RN
Suzanne Mosesso, RN	Kristen Leonard, RN
Ernie Robillard, RN (MDRO Coordinator)	

# HAND HYGIENE



**Hand hygiene** is a general term that refers to a method of removing microorganisms from the hands so the germs cannot be transmitted to anyone else. The two most common types of hand hygiene are *hand washing with soap and water* and using an *alcohol-based hand rub*.

## ➤ Soap and water

- Use when hands are visibly dirty, contaminated, or soiled, after using the restroom, and before eating or preparing food.
- Wash hands with soap and water to prevent the spread of certain organisms in which alcohol-based hand rub is not effective (*Clostridium difficile* and Norovirus).

**Proper hand hygiene is critical to the prevention of hospital-acquired infections!**

## ➤ Alcohol-based hand rubs



- Use for routine hand hygiene before & after patient contacts and with items in patient's environment.
- Cannot be used if hands are visibly soiled.
- Not to be used for patients on "Special Contact Precautions"

**Clean hands are the most important factor in preventing the spread of disease and antibiotic resistance.**

## HAND HYGIENE (CONT)

### Hand Hygiene Fast Facts:

- It is estimated that washing hands with soap and water could reduce diarrheal disease-associated deaths by up to 50%.
- A large percentage of foodborne disease outbreaks are spread by contaminated hands. Appropriate hand washing practices can reduce the risk of foodborne illness and other infections.
- Handwashing can reduce the risk of respiratory infections by 16%.

### GLOVE USE

**GLOVES** are to be worn when:



- Soiling of hands is likely
- In contact with open wounds, non-intact skin, or mucous membranes
- As warranted by certain isolation categories
- Gloves must be changed between patient contact & when heavily soiled.
- Wash hands before and after glove use.

★★★★★★★★★★  
**The most common  
mode of transmission  
of harmful germs is  
via hands!**

★★★★★★★★★★

## HAND HYGIENE (CONT)

For personnel who have direct contact with patients:

- NO Artificial nails/extendors/wraps are to be worn by any employees who have or may have contact with patients.
- Fingernail polish if worn, must not be chipped or cracked
- Natural fingernails kept at <1/4 inch in length

---

***ALL STAFF ARE EXPECTED  
TO KEEP FINGERNAILS  
CLEAN AND NEAT***

---

*EMPLOYEES WITH DAMAGED FINGERNAILS OR  
WHO HAVE SPECIAL CIRCUMSTANCES MUST SEE  
OCCUPATIONAL HEALTH*



### *Reminder*

**Glove use does NOT replace the need for Hand Hygiene**



**Hand Hygiene  
*Before and After*  
Glove Use**





## Basic Guidelines to Follow during Transport

- \* If no contact with blood or body fluids, mucous membranes, non-intact skin or open wounds or items contaminated with blood/body fluids is suspected when transporting a patient then

**Personal Protective Equipment (PPE) is not to be worn outside of the patient room.**

### **Patient transport:**

- \* If contact with blood or body fluids, mucous membranes, non-intact skin or open wounds or items contaminated with blood/body fluids is suspected when transporting a patient, then the appropriate PPE is to be worn outside of the patient room. The healthcare provider must perform hand hygiene and don clean PPE prior to transport in the hallway.

### **Specimen transport:**

- \* During transport of specimens the individual will use a single glove technique. The hand used to carry the biohazard bag requires a glove. The other hand will remain glove free and be used to open and close doors, push elevator buttons, etc.





# West Roxbury Isolation Precaution Signs

## What do they mean?



## For Visitors

- Anyone who visits a hospital patient who has an isolation sign outside their door should stop at the nurses' station before entering the patient's room.
- Isolation precautions create barriers that help prevent the spread of germs in the hospital. They may be needed to protect you or the patient you are visiting.
- Depending on the type of isolation precaution, you may need to put on a gown, gloves and/or a mask prior to entering the patient's room. The signs tell you what you will need to do.
- Clean your hands before and after touching the patient and the patient's environment.
- Alcohol-based hand rub is usually better for cleaning your hands than soap and water, unless your hands are visibly soiled.
- Cover your cough, clean your hands and do not visit a sick person if you are not feeling well.

**Clean Hands, Protective Clothing, and Proper Cleaning Will Help Control the Spread of Drug-Resistant Germs**

## Brockton Infection Prevention Guidelines for Volunteers

\*Perform hand hygiene prior to entering a room and upon exiting

ISOLATION CATEGORY	ENTERING RESIDENT ROOM	EXITING RESIDENT ROOM
<p style="text-align: center;"><b>STANDARD PRECAUTIONS</b></p> <p style="text-align: center;">(NO SIGN POSTED)</p>	<p><b>Gown and gloves</b> not needed unless anticipated contact with blood/bodily fluids or contaminated items</p>	<p>Wash hands using <b>Alcohol-based hand rub</b> or <b>soap and water</b></p> <div style="text-align: center;">  <span>OR</span>  </div>
<p><b>Barrier Precautions</b></p> <ul style="list-style-type: none"> <li>➤ <b>Gown &amp; Gloves</b> for contact with resident and the environment</li> <li>➤ Staff are required to follow the <b>5 Moments of Hand Hygiene</b></li> <li>➤ <b>Residents and Visitors</b> are encouraged to perform <b>Hand Hygiene</b> prior to entering and exiting the room</li> <li>➤ <b>Visitors</b> are encouraged to visit in the day room</li> <li>➤ <b>Visitors</b> should gown &amp; glove while in the residents bedroom assisting with resident care</li> <li>➤ <b>Private Room or Cohorting</b> per the discretion of Infection Prevention</li> <li>➤ <b>Daily Cleaning of the Room</b> with emphasis of high touch surfaces is a shared responsibility performed by Nursing and EMS. <small>Sign to be Removed by EMS Only</small></li> </ul>	<p><b>Gown and gloves</b> needed for contact with the patient or the patient's environment</p> <div style="text-align: center;">  <span>AND</span>  </div>	<p>Remove gown and gloves and perform hand hygiene</p> <div style="text-align: center;">  <span>OR</span>  </div>
<p style="text-align: center;"><b>Special Contact Precautions</b></p> <p style="text-align: center;"><b>Gloves &amp; Gown</b></p> <p style="text-align: center; color: red;">REQUIRED for Entering Room</p> <p><small>Visitors Included</small></p> <ul style="list-style-type: none"> <li>➤ After glove removal <b>Soap &amp; Water</b> for Hand Hygiene</li> <li>➤ Keep patient care items in room or thoroughly disinfect on Discharge. <small>Sign Removed by EMS</small></li> <li>➤ Standard Precautions Always Apply</li> </ul> <p style="text-align: right; color: red;"><small>When Precautions are to be Removed by Nursing or EMS</small></p>	<p><b>Gown and gloves</b> prior to entering room</p> <div style="text-align: center;">  <span>AND</span>  </div>	<p>Remove gown and gloves and perform hand hygiene with <b><u>Soap &amp; Water</u></b></p> <div style="text-align: center;">  </div>
<p style="text-align: center;"><b>Enhanced Contact Precautions</b></p> <div style="text-align: center;">  <p><b>Gown and Gloves</b> upon entry to room <b>Private Room</b> indicated</p> <p><b>Good Hand Hygiene with Alcohol Hand Rub</b></p> <p><small>Sign to be Removed by EMS Only</small></p> </div>	<p><b>Gown and gloves</b> prior to entering room</p> <div style="text-align: center;">  <span>AND</span>  </div>	<p>Remove gown and gloves and perform hand hygiene with <b><u>Alcohol-based hand rub</u></b></p> <div style="text-align: center;">  </div>
<p style="text-align: center;"><b>Droplet Precautions</b></p> <div style="text-align: center;">  <ul style="list-style-type: none"> <li>➤ <b>Private Room/Cohorting</b> indicated</li> <li>➤ <b>Surgical Mask</b> worn when entering room</li> <li>➤ <b>Patient Restricted to Room</b>, if must leave room for a diagnostic study, he/she must wear a surgical mask</li> <li>➤ <b>Visitors</b> see Nurse before entering</li> <li>➤ <b>Standard Precautions</b> Always Apply</li> <li>➤ <b>As Always</b> <b>Good Hand Hygiene</b></li> </ul> <p><small>Sign to be Removed by EMS Only</small></p> </div>	<p>Standard facial <b>mask</b> needed upon entering room</p> <div style="text-align: center;">  </div>	<p>Remove mask and perform hand hygiene</p> <div style="text-align: center;">  <span>OR</span>  </div>
<p style="text-align: center;"><b>Neutropenic Precautions</b></p> <div style="text-align: center;">  <ul style="list-style-type: none"> <li>➤ <b>Private Room Preferred</b></li> <li>➤ Wear face masks, gloves &amp; gowns if <b>you</b> have any signs/symptoms of an illness</li> <li>➤ Patient <b>NOT</b> to care for any plants or flowers (prefer no plants or flowers in room)</li> <li>➤ <b>Fresh fruits and vegetables</b> (that are not washable) are restricted</li> <li>➤ <b>Visitors</b> see Nurse before entering</li> </ul> <p><b>Hand Hygiene before Patient Contact is Critical</b></p> </div>	<p>Patients do not have a disease that can be spread to you but they can very easily get an infection from you.</p> <p><b>If you feel ill, do not enter the room</b></p>	<p>Perform hand hygiene <b>before and after</b> entering room.</p>



# OSHA BLOODBORNE PATHOGENS STANDARD

The OSHA Blood Borne Pathogens Standard is a law designed for employees and employers with the sole intention of reducing or eliminating the risk of transmission of blood borne pathogens in the workplace.

**YOU CANNOT TELL IF  
SOMEONE IS CARRYING A  
BLOODBORNE PATHOGEN  
BY LOOKING AT THEM!**

Blood borne pathogens are infectious agents that can be transmitted by exposure to blood & body fluids.

The blood borne pathogens of most concern in the medical setting include:



- Hepatitis B
- Hepatitis C
- Human Immunodeficiency Virus (HIV)

An exposure in the healthcare setting would be

- \* An injury with a used sharp (scalpel, sharp object, etc.)
- \* Splash to Eyes/ Nose/ Mouth with Blood or Other potentially Infectious Material.
- \* Needle Stick Injuries
- \* Contact of blood or other potentially infectious material with non-intact skin

## STANDARD PRECAUTIONS

The first line of defense against blood borne pathogens is standard precautions and personal protective equipment (PPE).

## STANDARD PRECAUTIONS (CONT)

Standard Precautions requires you to use personal protective equipment (PPE) to place a barrier between yourself and all blood and body fluids, mucous membrane, non-intact skin and contaminated items.

● ● ●  
**Always assume body fluids are infectious!**  
● ● ●



- Gloves are to be worn when contact with blood/body fluids, mucous membranes, non-intact skin is expected and they also to be worn when handling items contaminated with blood/body fluids.



- A gown is to be worn if soiling of clothing is likely.



- Goggles and Masks or a face shield is to be worn if splattering of blood/body fluids is anticipated.

### SAFE WORK PRACTICES:

- Frequent hand washing
- Wear PPE when indicated
- Call housekeeping to clean up blood and/or body fluids
- Never push down trash with hands
- Never pick up broken glass with hands

### WHAT TO DO IF YOU GET AN EXPOSURE

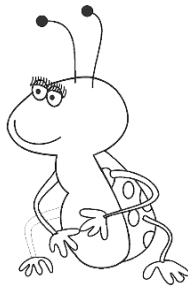
- Report to your supervisor immediately
- **Cuts, Punctures:** Wash area with soap and water
- **Eye splashes:** rinse eyes immediately

**GO IMMEDIATELY TO OCCUPATIONAL HEALTH OR  
THE EMERGENCY ROOM FOR EVALUATION**

## MINIMIZING THE POTENTIAL FOR ATTRACTION OF PESTS THROUGH PROPER STORAGE AND DISPOSAL OF FOOD ITEMS

Some basic practices can help prevent  
attraction of pests...

Don't give pests a reason to be here!  
the



Keep food & fruits in closed  
containers! finished!



Don't leave food out for extended  
periods of time. Eat & Clean!

Do not collect empty soda cans in  
Medical Center



Discard food immediately after



Wash Dishes after use & keep  
work area clean!

# Proper Disposal of Trash

## INFECTIOUS WASTE

- \* Blood
- \* Items heavily soiled with blood
- \* Blood transfusion bags
- \* IV tubing with blood
- \* Dressings soaked with blood



## REGULAR WASTE

- \* Paper
- \* Food Debris
- \* Wrappers
- \* Chux
- \* Items soiled with urine, feces, or
- \* sputum (unless heavily soiled with blood)



## SHARPS

- \* Needles
- \* Syringes
- \* Slide covers
- \* Broken glass
- \* Lancets
- \* Scalpels
- \* Suture Needles
- \* Used or unused sharps



**ALL SHARP ITEMS MUST BE DISPOSED OF IN  
DESIGNATED SHARPS DISPOSAL BOXES**

# FOOD SAFETY

## PROVIDING SAFE FOOD PREVENTS:

- Foodborne illness
- Contamination of foods
- Choking or aspiration

### Good Personal Hygiene Contributes to Food Safety.

#### Do not prepare or serve food if you have:

- Open skin lesions
- Symptoms such as fever, diarrhea, vomiting, sore throat or jaundice
- Been recently diagnosed with a foodborne illness



### Food Handling:

- While distributing the food, avoid handling foods with hands; use tongs and other deli tissue to handle food. No bare hand contact with food.
- Gloves are not needed unless you have contact with the resident or contact with the resident's immediate environment.
- Minimize touching residents and the environment. If contact with the resident or resident's environment occurs, perform hand hygiene.
- If a resident/patient needs assistance in feeding, gloves are indicated.
- Wash your hands between tasks.

## FOOD SAFETY (CONT)

### Food Storage:

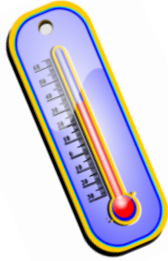
- Always refrigerate perishable food within 2 hours--1 hour when the temperature is above 90 °F (32.2 °C).
- Check the temperature of your refrigerator and freezer with an appliance thermometer. The refrigerator should be at 40 °F (4.4 °C) or below and the freezer at 0 °F (-17.7 °C) or below.
- Cook or freeze fresh poultry, fish, ground meats, and variety meats within 2 days; other beef, veal, lamb, or pork, within 3 to 5 days.
- Perishable food such as meat and poultry should be wrapped securely to maintain quality and to prevent meat juices from getting onto other food.
- To maintain quality when freezing meat and poultry in its original package, wrap the package again with foil or plastic wrap that is recommended for the freezer.
- Canned foods are safe indefinitely as long as they are not exposed to freezing temperatures, or temperatures above 90 °F. (32.2 °C) If the cans look ok, they are safe to use. Discard cans that are dented, rusted, or swollen.

### GOOD FOOD SAFETY PRACTICES:

- \* Closely inspect food for damage and expiration dates
- \* Clearly mark date/time to use by, serve or discard.
- \* Hold glasses, utensils, plates by stems, handles or sides.
- \* Always check with the nurse or dietitian for Veterans with allergies and other food restrictions.

## FOOD SAFETY (CONT)

\* **The biggest factor in foodborne illness outbreaks is time & temperature abuse**



- Cook or reheat food to temperatures (above 165° F)
- Disease-causing microorganisms grow and multiply between 41°F to 135°F
- Discard any food that is held 2 hours or longer without adequate time and temperature control.
- Keep hot food hot (above 135° F) and cold food cold (below 41° F)

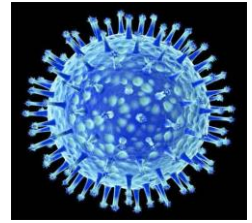
**Do not serve food or beverages to a Veteran who is "NPO" (Nothing by Mouth). Look for these NPO signs by the Veteran's door, above the bed or at the bedside**



### GENERALLY ACCEPTED SNACK FOODS FOR THE CLC:

- Fresh fruit. Fruit should be washed
- Cheese and crackers, crackers with peanut butter.
- Donuts --COMMERCIALY PREPARED- i.e., plain, iced, glazed, or jelly filled (cream or custard filled not recommended).
- Pastries --COMMERCIALY PREPARED- (cream or custard filled not recommended).
- Ice cream --COMMERCIALY PREPARED- (no ice cream with peanuts, fruit, candy pieces, raisins, etc.)
- Cake --COMMERCIALY PREPARED--- i.e., sheet cake and/or layer cake with or without icing (cream or custard filled not recommended).
- Cookies-- COMMERCIALY PREPARED
- Breads

# INFLUENZA (FLU)



## Why should I get a flu shot?

- \* Getting a flu shot is the best way to slow the spread of flu from person to person.
- \* A flu shot can protect you and your family or friends against flu.
- \* Because of flu, thousands die and many more are hospitalized each year in the U.S.
- \* Anyone can get flu, but some people are at high risk for complications from flu:
  - people age 65 and older
  - people with health problems like asthma, diabetes, heart disease, chronic lung disease, and other chronic illnesses or conditions
  - pregnant women or people caring for an infant or a family member with health problems

### FAST FACTS:

#### What is flu?

- \* Flu - short for influenza - is a respiratory illness caused by influenza viruses.
- \* Flu spreads easily. It occurs every year, mainly during fall, winter, and spring.
- \* Flu is different from a cold. People with flu usually feel achy and have a fever.

## When should I get the flu shot?

**Get a flu shot in the fall**, or as soon as flu shots are available. A flu shot will protect you the entire flu season. Every year, the flu shot vaccine is updated to protect against the flu viruses most likely to spread that year so you will need to get a flu shot every year

## Can I get flu from a flu shot?

**No!** Only inactive (dead) flu virus is used to make flu shot vaccine, so **you cannot get flu from a flu shot.**

### Should you get a flu shot?

Yes! Everyone should protect themselves from the flu, especially:

- ✓ Adults aged 50 and older
- ✓ Anyone who lives in community living centers
- ✓ Anyone with ongoing health problems
- ✓ Children aged 6 months through 18 years
- ✓ Women who will be pregnant during flu season
- ✓ Healthcare workers and caregivers, including household contacts



## Can I still get flu after I get a flu shot?

### Maybe if:

- \* you are exposed to flu **before or right after you get a flu shot**, you could get flu before the shot takes effect
- \* the flu shot vaccine does not match all the flu viruses that are spreading
- \* flu viruses change after the flu shot is made (even so, you will still get some protection from the flu shot)
- \* you have an illness or weak immune system that causes your body to take longer to make antibodies
- \* your body fails to make antibodies after you get a flu shot

### *Remember*

***You cannot get flu from a flu shot!  
Flu shots are safe and they work!***

**Get**  
your flu shot

**Cover**  
your coughs  
& sneezes

**Clean**  
your hands

### Is the flu shot safe? Yes.

- Most people who get the flu shot do not have serious side effects or reactions to it.
- Some people may have redness or swelling on their arm where the shot was given.
- A very small number of people get minor body aches, a headache, or a low fever that lasts only a day or two.



## What else can I do to slow the spread of flu?

- Stay home when sick.
- Clean your hands often. Avoid touching your eyes, nose, or mouth. Germs can be spread by touching something that is contaminated with germs and then touching your eyes, nose, or mouth
- Cover your mouth and nose with a tissue when coughing or sneezing.

- Properly dispose of tissues in trash receptacles.

## **Pet Therapy Program: Animal Assisted Activities (AAA) & Animal Assisted Therapy (AAT)**

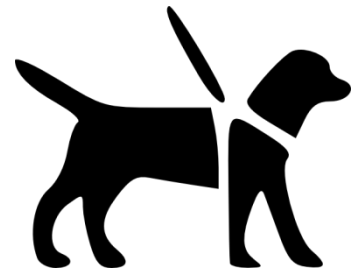
**ANIMAL ASSISTED ACTIVITIES (AAA)** - Volunteers who take their pets to visit hospitals, nursing homes, day care programs and many other types of facilities for the purpose of being petted and socializing with residents/patients

**ANIMAL ASSISTED THERAPY (AAT)** - Health care professionals or certified therapist who use there animal, or work in partnership with a volunteer and a volunteer's pet, using the pet as a treatment modality in a written, individualized treatment plan with specific documented goals

**All animals and handlers will be evaluated by the Recreation Therapist (RT) prior to acceptance into the program.**

No personal pets or animals are allowed in the Medical Center buildings or grounds except for:

- Service Animals
- Animal assisted interventions (Therapy Animals) for patients, as described above.



## ***CLOSTRIDIUM DIFFICILE (C. DIFF) FACT SHEET***

**What is *Clostridium difficile*?** *Clostridium difficile* also known as C. diff is a contagious disease that can cause severe diarrhea and, sometimes even death.

**How do you get C. diff?** It is transmitted by picking up the germ on your hands and then the germ is passed to your mouth when you eat or touch your mouth. Sometimes the germ stays in the gastrointestinal tract without making you sick, but people at high risk often become sick.

**Where is the germ found?** The germ can be found on clothes, bed linens, and objects in a patient's room. The germs can be spread to other people and objects.

### **People at increased risk for C.diff:**

- Prolonged hospitalized patients
- Elderly persons
- Immune-compromised persons
- Persons on antibiotics
- Gastrointestinal surgery

## **Preventing the Transmission of *C. difficile***

### **Special Contact Precautions**

- Patients with C. diff are put in a private room
- All people must wear gloves and gowns to enter the room (visitors, too)
  - ◆ Consider the patient and everything in the room as potentially contagious
  - ◆ Dedicate equipment to this patient only (BP cuff, stethoscope, thermometer, etc.)
  - ◆ Do not share commode with any other patient
- Thoroughly wash hands with **SOAP & WATER** *after* removal of gloves



\*\*\*Alcohol gel does not kill this germ. You need to physically remove the germs from your hands with rigorous rubbing of hands with hand washing. The gown protects your clothes. No mask is needed.

## *Liability, Injury, and Damage Protection for VA Volunteers*

### **Issue**

Update of VHA policy on Liability, Injury, and Damage Protection for VA Volunteers

### **Discussion**

The purpose of this document is to ensure that VA volunteers are informed that they have the same protections from personal liability as paid Federal employees.

Federal law provides immunity to all Federal employees (including VA volunteers) from claims or suits for personal injuries or death, or for property damage so long as the employees' actions are part of their Federal duties.

If a claim is made or suit is filed against a volunteer or other VA employee, VA does a quick investigation to determine if the employee's actions were part of his or her official Federal duties and not, for example, the personal business of the employee. VA then recommends to the Department of Justice that any suit, if filed in a State court, be removed to a Federal Court and the Federal Government takes the place of the employee in the suit. If the Department of Justice agrees, that is exactly what happens, and the employee is no longer a party to the claim or suit.

The Government does not pay fines imposed on employees for parking or traffic offenses committed while driving for VA. If a claim or suit involves an accident where the volunteer or other employee received a traffic ticket, VA conducts the usual investigation to determine if the employee's actions were part of his or her official duties.

### **VAVS Requirement**

To ensure that volunteers will be considered to be Federal employees and to protect them otherwise, VA Voluntary Service (VAVS) has a number of requirements, including

- VA acceptance of VAVS volunteers as Without Compensation (WOC) employees,
- Job orientation for the VA supervisory staff and volunteer orientation for the Voluntary Service staff,
- Overall supervision of volunteers by paid VA employee(s), and
- Volunteer drivers furnishing proof of a safe driving record and insurance.

### **Then It's Up To You**

Where these requirements are met, volunteers will be found to be Federal employees. It is then up to you, the volunteer, to make sure your actions are taken as part of your Federal duties.

The precautions you should take include:

- Making sure you have been expressly authorized to use a Government vehicle or to conduct Government business using your private vehicle,
- Taking the most direct routes when driving as a volunteer. Side trips to do personal errands for yourself or another, for example, are not part of your Federal duties;
- Not picking up unauthorized passengers;

## *What if...*

### **What if you are in an accident?**

If you are involved in an accident while driving as a volunteer, you should first, of course, summon any medical assistance necessary. Then call the police and follow their instructions. Do not make any statements at the scene of the accident about whose fault the accident was or any other statement except to identify you as a VA volunteer and to furnish any information required by law. As soon as possible, you should fill out a Standard Form 91, "Operator's Report of Motor Vehicle Accident, and give it to the Disabled American Veterans (DAV) Hospital Service Coordinator (HSC) of the Chief of Voluntary Service. If you are contacted later by an insurance investigator, a non-VA attorney, or other interested party you should refer them to the DAV HSC, the Chief of Voluntary Service, or the VA District Counsel.

### **What if you are sued?**

If you are served with suit papers from an accident you were in while driving as a VA volunteer, you should, as soon as possible, furnish the papers to the DAV HSC or Chief of Voluntary Service, and tell them how you received the suit papers. The DAV HSC or Chief of Voluntary Service, will alert the VA District Counsel, who will see that any additional investigation is completed before contacting the United States Attorney so that you may be dismissed from the suit. You may also be contacted by the VA District Counsel during an administrative claims investigation of an accident before any suit is filed. You should give the District Counsel your full cooperation so that your interests and those of the Government will be protected.

### **What if you are injured on the job?**

If you are injured while rendering services to VA on your volunteer job, you should promptly notify your VA supervisory staff, obtain a form for filling a claim, and notify your Voluntary Service office. VA will forward your claim to the Office of Workers' Compensation Programs at the Department of Labor. That office will determine your benefits which may include medical care and hospitalization, compensation for any loss of wages or disability, and survivor's benefits and burial expenses in the case of death.

### **What if your property is lost or damaged on the job?**

Under the Military Personnel and Civilian Employees Claims Act, VA employees (including volunteers) may file claims on VA Form 2-760 for damaged or lost personal property with the local personnel office within two years of the damage or loss. VA may pay if your property was lost or damaged "incident to" your service and your possession of the property was reasonable, useful, or proper under the circumstances. VA cannot pay if the loss or damage was intentional or due to your negligence. Also, if you have a right to recover for the loss or damage of your personal property from an insurance company, you must file a claim with your insurance first.

# Welcome to the Volunteer Auto Log In System

Here are some tips!

What the computer says is written in plain type (Courier). What you need to do is written in **BOLD**.  
Good Evening. Welcome to the Boston VA Voluntary Service Timekeeping Program. Press any key to log in.

## **PRESS ANY KEY ON THE KEYBOARD**

Enter volunteer code as supplied to you by your Voluntary Service office.

## **PRESS ENTER OR CLICK ON SUBMIT**

The computer will welcome you and list your combinations. These are your volunteer assignments such as working in recreation for the DAV. Some volunteers have more than one assignment.

**SELECT THE ASSIGNMENT NUMBER YOU WILL BE WORKING,**

**TODAY. CLICK ON**

## **SUBMIT**

The computer asks:

How many hours will you be working today (1-9)?

**TYPE THE NUMBER OF HOURS YOU ARE WORKING TODAY OR USE THE MOUSE TO SELECT**

## **CLICK ON SUBMIT**

If you log on in the morning, Monday through Friday, and are working 4 or more hours, the computer will ask; will you be eating lunch today?

**SELECT YES OR NO BY CLICKING THE MOUSE.**

**A printer box will appear and you will have to click on the command box which says, "PRINT".**

The computer says that the log in is complete AND A LUNCH SLIP WILL PRINT OUT WITH YOUR NAME, DATE AND AMOUNT OF \$5.25 WHICH CAN USED IN ANY VETERANS CANTEEN FOOD STATION.

If you are not able to log in, please contact your local Voluntary Service Office Monday through Friday from 8:00 AM to 4:30 PM.

# *Voluntary Service Staff & Contact Information*

## **Chief, Voluntary and Recreation Services**

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### **Jamaica Plain Campus**

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